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ABSTRACT

This paper discusses the importance of collaboration across social service and educational sectors as a way of achieving a coherent and integrated system that assures that young children receive the high quality of care and education they need and that also maximizes the use of federal, state, and local resources. Section 1 of the paper discusses the nation's commitment to six education goals and the challenges of finding more effective means whereby programs for the poor and the working poor, especially child care and early childhood programs, can reach the children who need them. Section 2 explores the extent to which all children are ready to learn and the extent to which society is ready to support young children. The characteristics of an early care and education system that works for children and families are explored in section 3. Section 4 describes the major sources of new or expanded support for young children and their families. Section 5 identifies the need to create a shared vision for young children and their families, and to establish a sustainable cross-sector mechanism to carry out long-term planning and implementation to bring the vision to reality. This section also discusses the need to build linkages among the various program components, develop joint or coordinated responses to problems in the current set of programs and services, and strengthen the overall capacity to connect disadvantaged families to high-quality developmental services. A 22-item bibliography on early childhood programs and new funding is included. (SM)

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ARE WE READY?

COLLABORATION TO SUPPORT YOUNG CHILDREN AND THEIR FAMILIES

Janet E. Levy, Sharon L. Kagan, and Carol Copple

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March 1992

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I. Commitment, Challenge, and Opportunity

In October 1989, the President and the fifty governors, in an unprecedented move, committed the nation to six education goals. Though the goals are for all, their achievement would have special meaning for millions of children and families who otherwise may face long-term disadvantage and dependency.

The first goal and its associated objectives -- which many would argue are the most important because they form the foundation on which all other success must be built -- speak to the circumstances of our youngest citizens:

By the Year 2000, all children in America will start school ready to learn.

All disadvantaged children will have access to high quality and developmentally appropriate preschool programs that help prepare children for school.

Every parent in America will be a child's first teacher and devote time each day to helping his or her preschool child learn; parents will have access to the training and support they need.

Children will receive the nutrition and health care needed to arrive at school with healthy minds and bodies, and the number of low birthweight babies will be significantly reduced through enhanced prenatal health systems.

A commitment as far-reaching as this one poses an enormous challenge not only for the education system, but indeed for the nation as a whole and, in very practical terms, for all of the institutions that serve young children and their families. For children to enter school ready to take full advantage of what a reformed, revitalized education system has to offer, their physical, intellectual, emotional and social development must be nurtured from the earliest moment. Much of the responsibility for this nurturing rests with families and communities. But for families and communities -- particularly those in areas of severe disadvantage -- to fulfill this crucial role, they must be supported by people-serving systems which offer the right kinds of help, at the right times, and in ways that reinforce the families' inherent strengths and concern for their children's well-being.

Fortunately, the challenge of assuring the healthy development of all children is being undertaken at a time when -- in contrast to a generally recessionary climate -- there are significant new resources available. Help in caring for and nurturing young children traditionally has come from a variety of public, as well as private, sources. Recently, federal and state action has both expanded and enriched this pool, in particular making more services available to the poor and working poor. Child care funding under the Family Support Act of 1988, the Child Care Development Block Grant, Head Start expansion, and expansion of state-funded preschool and early

childhood efforts all demonstrate public recognition that, more than ever before, families with young children need help to assure their children's well-being.

But this growth in resources poses significant challenges. It brings greater complexity to an already complex funding picture. Moreover, it risks continuing an unproductive differentiation in the purposes and administration of programs for young children. Presently, public and private human service agencies administer a multiplicity of programs designed to assure that children have access to full-day services so that parents can work, while state and local education systems typically offer half-day preschool, prekindergarten and early childhood programs to assure that young children are ready when they begin formal schooling. If these organizations continue to pursue separate paths and seemingly separate goals, planning and implementing in isolation the various new efforts, the growth in resources may serve only to set in concrete past practices that too often have kept children at risk from receiving comprehensive services that foster overall well-being and readiness for school.

Consider, for example, the three million children under age five who are living in families receiving AFDC. If child care subsidized under the Family Support Act is treated apart from other early childhood programs, welfare department staff who help parents select care for their children may not be made aware of the range of high quality developmental programming available in many sectors. In this case, the limited information and financial means provided AFDC parents might well mean that their children miss out on an important opportunity, perhaps even while a given state is making substantial investments in services to assure readiness. Should that occur, neither the goal of educational readiness nor the goal of reduced future dependency on welfare would be realized.

Developments such as these are a risk today, but not an inevitability. To the contrary, there are many reasons to be hopeful that the opportunity offered by new resources and the incentive created by new commitments will be used to full advantage. There is widespread acceptance at all levels of policymaking and practice of the need to integrate services, and efforts to accomplish this are informed by a growing body of knowledge about how to accomplish the task. In such an environment, policymakers from education, human services, and health are uniquely positioned to bring together the heretofore separate traditions and resources of child care, early childhood education, and family support into an integrated, coherent vision for young children and their families.

Though yet insufficient to do all that is needed, the combination of these new initiatives and the resources that were already on the table can help:

- Nurture the healthy development of all children, including those from low-income families, and ensure that when they enter school they are ready to succeed;

- Create and assure access to a system of high quality "whole-child, family-centered"¹ services that both contribute to child well-being and development and support families in carrying out their vital role; and
- Forge critical connections among the systems and institutions serving children and families so that the full range of child and family needs can be met smoothly and effectively.

Every state and many communities at this point are engaged in some level of interagency activity, often with services to young children and their families as a focus. These represent an important step, but only a beginning. Much of the work is directed to coordinating distinct program efforts or to integrating relatively small aspects of the overall public investment in young children. Of particular concern are the scarcity of links between efforts funded through human services on the one hand and those in education on the other. This paper encourages policymakers not only to continue the process of collaboration that is underway, but to expand it in breadth and depth to take full advantage of the opportunities that exist and to create an integrated system that is likely to result in better outcomes for young children at risk.

II. How Close is the Nation to Assuring That All Children Are Ready To Learn?

"Readiness to learn" is a broad construct that involves a child's physical, emotional, social and cognitive development. It is far more than knowing letters and shapes or being ready to read. Readiness involves the total child, including his or her health, motivation, curiosity, task persistence, cognitive knowledge, and peer relations.²

We know that readiness does not develop solely from innate characteristics of the child, but is strongly influenced by the opportunities and experiences available to him or her. Readiness is a societal responsibility. The real questions to be asked, therefore, are two: To what extent are children ready and to what extent is society ready to support young children? Unequivocal data provide troubling answers, revealing that many American children are in serious jeopardy and that the readiness goal is still well out of reach. Consider, for example, that:

¹The term "whole child, family-centered" is adapted from an article by Peggy Daly Pizzo of the National Center for Clinical Infant Programs. The article, "Whole Babies, Parents and Pieces of Funds: Creating Comprehensive Programs for Infants and Toddlers," appeared in Zero to Three, February 1990, pp. 24-28.

²See the National Education Goals Panel, Resource Group I Technical Subgroup Report for a further discussion of dimensions of readiness. The report may be obtained from the National Education Goals Panel, 1850 M Street N.W., Suite 270, Washington, D.C. 20036.

- One in five American children live in families who are poor and often lack sufficient resources to purchase even the basic necessities of life such as adequate nutrition and safe housing, let alone toys and books that can stimulate the children's learning. The poverty rate for children under age three is twenty-five percent.³ Research has shown that children from poor families are two to three times more likely to drop out of school than children from more affluent families.⁴
- Each year, over a quarter of a million babies are born at low birthweight, a condition which significantly increases the risk of developmental delays, learning difficulties and problems in school.⁵
- Thirty percent of two-year-olds, and over fifty percent of those living in urban areas, have not received all the recommended immunizations against preventable childhood diseases.⁶ According to a survey by the Robert Wood Johnson Foundation, thirty-seven percent of children age one to five in families living below the poverty line had not seen a doctor within the last year.⁷
- Twenty-five percent of children live with only one parent, in households that are particularly prone to poverty and stress. The Institute for Research on Poverty at the University of Wisconsin reports that there is increasing evidence that children from intact families are more likely to graduate from high school than children living in other family arrangements.⁸
- Reports the National Commission on Children, "One in five children between the ages of three and seventeen is reported by parents to have had a developmental delay, learning disability or behavior problem during

³Children's Defense Fund, Leave No Child Behind: An Opinion Maker's Guide to Children in Election Year 1992 (Washington, D.C.: Children's Defense Fund, 1991).

⁴Andrew Hahn and Jacqueline Danzberger, Dropouts in America: Enough is Known for Action (Washington, D.C.: Institute for Educational Leadership, 1987).

⁵U.S. Department of Health and Human Services, Public Health Service, Healthy People 2000: National Health Promotion and Disease Prevention Objectives (Washington, D.C.: U.S. Department of Health and Human Services, 1991).

⁶Ibid.

⁷D.L. Wood et. al., "Access to Medical Care for Children and Adolescents in the United States," Pediatrics 86(5).

⁸Institute for Research on Poverty, "Family Structure," Insights, January 1991.

- childhood. Children from single parent families are two to three times as likely to suffer these problems as children living with both parents.¹⁰
- Only about 40% of preschool-age children from families with incomes of less than \$30,000 were enrolled in preschool in 1991.¹¹

How well positioned is the nation to correct conditions such as these which threaten the commitment to "readiness?" A good place to begin answering that question is with an evaluation of the current system for providing care and education for young children outside the home, because that is where millions of children under the age of five spend much of each day. There is considerable evidence to indicate that participation in a high quality out-of-home program can enhance children's school performance. Citing studies to this effect, Ernest Boyer says, "Youngsters in such programs make new friends, develop language skills, learn to share, and create imaginary worlds. They gain social confidence and develop a sense of right and wrong, increasing prospects for school success."¹¹ The impact of quality programming appears particularly significant for children at risk. Low-income children who attended high quality preschool programs have been found to do better in school, as well as to be more successful in other areas such as post-graduation employment.

Given the number of children who are in some form of care and the clear impact that high quality programming has, it is deeply troubling that much of what is presently available is deemed "inadequate to meet the needs of children, parents, and society as a whole . . . [A] large number of children [are] cared for in settings that fail to protect their health and safety and to provide appropriate developmental stimulation." Just as high quality care can strengthen children's readiness to learn, "low quality care threatens the development of children, especially those from poor and minority families who may not have access to higher quality alternatives."¹²

¹⁰National Commission on Children, Beyond Rhetoric: A New American Agenda for Children and Families (Washington, D.C.: National Commission on Children, 1991). Data are cited from Developmental, Learning and Emotional Problems: Health of Our Nation's Children, United States, 1988 by N. Zill and C.A. Schoenborn.

¹¹National Task Force on School Readiness, Caring Communities: Supporting Young Children and Families (Alexandria, VA: National Association of State Boards of Education, 1991).

¹²Ernest L. Boyer, Ready to Learn: A Mandate for the Nation (Princeton: The Carnegie Foundation of the Advancement of Teaching, 1991).

¹³Anne Meadows, ed., Caring for America's Children (Washington, D.C.: National Academy Press, 1991), p. 4.

Three types of problems contribute to the inadequacy of the current early care and education system: poor quality of programming and services; barriers to access; and fragmented funding and administration.

Workforce issues -- including poor preparation, low compensation, and extraordinarily high staff turnover¹³ -- are major sources of concern about quality and the effects on children. The National Child Care Staffing Study found that "children in programs with high turnover and undertrained staff were less competent in language and social development. Infants and toddlers, the age group most sensitive to constant changes in caregiving personnel, were particularly found to suffer when their teachers lacked specialized training."¹⁴ Lack of adequate standards and weak enforcement of those standards which do exist are another concern. The Children's Defense Fund reports, "An estimated 2.6 million children -- forty-three percent of all children in out-of-home care -- are unprotected by state regulation in large part because the settings in which they are cared for are exempt from even minimal health and safety standards." Moreover, "[s]tandards that do apply to regulated child care programs often fall below levels broadly recognized as necessary to ensure young children's safety and full development . . . and many state licensing agencies lack sufficient resources to monitor and enforce the requirements they impose."¹⁵

Affordability is probably the leading barrier to children having access to good developmental programming. But also of concern are the number of available programs, the mismatch between program design and what parents need -- for example, full-day care for a child while a parent is working -- and, in many cases, simply a lack of knowledge on the part of parents about what to look for in choosing a caretaker for their children.

Finally, fragmentation in the way early childhood programming has been developed, financed and administered serves both to create and exacerbate many of the other problems and to frustrate efforts to fix them.¹⁶

¹³Staff turnover in child care centers in 1988 was reported to be forty-one percent. See Marcy Whitebook, Carollee Howes, and Deborah Phillips, Who Cares? Child Care Teachers and The Quality of Care in America (Oakland: Child Care Employee Project, 1989).

¹⁴Child Care Employee Project, What States Can Do To Secure a Skilled and Stable Child Care Work Force: Strategies to Use the New Federal Funds for Child Care Quality (Oakland: Child Care Employee Project, 1991).

¹⁵Gina C. Adams, Who Knows How Safe? The Status of State Efforts to Ensure Quality Child Care (Washington, D.C.: Children's Defense Fund, 1990), pp. vi-vii.

¹⁶For a full discussion of the effects of fragmented development on early care and education services, see Sharon L. Kagan, United We Stand: Collaboration for Child Care and Early Education Services (New York: Teachers College Press, 1991).

In sum, there is much to suggest that the nation is still far from fulfilling the commitment to "readiness" for all children. Too many children face conditions which may imperil even basic survival and certainly healthy development, and the system -- actually a "non-system" -- that is charged to serve them at present is ill-prepared to meet the challenge which lies ahead.

III. What to Shoot For: Characteristics of an Early Care and Education System That Works for Children and Families

What would a more effective structure of support for young children and their families -- an early care and education system -- look like?

The system would offer families a real choice among a range of affordable options that reflect the diversity of preferences and needs, and the information needed to choose well. There would be a sufficient supply of care and education services for all children who need them, including children under three. High-quality family day care, center care, and school-based programs all would be available and affordable. Though varying in structure and format, the different options uniformly would contribute to children's physical, social, emotional and intellectual development and support families in their crucial nurturing roles. The system also would include readily available sources of information to help parents select an option best suited to their children, outreach to engage those families who may be most in need of services but least likely to seek them out independently, and subsidies adequate to assure that low-income families are not compelled to settle for poor quality options.

The system would provide children with high quality, developmentally appropriate care and education. David Hamburg, President of the Carnegie Corporation, says, "High quality early education and child care programs are essential building blocks for healthy human development . . . [Such programs] are especially important for children from disadvantaged families, who benefit from the intensive attention they receive in smaller classes and from their nurturing by expertly trained caregivers."¹⁷

While the system would include a variety of settings, common elements of "quality" would be found throughout. Because the quality of the system would depend largely on the quality of the caregivers, the system would include mechanisms for recruiting, training and rejuvenating caregivers so that each would be knowledgeable about child development and capable of forming warm, nurturing relationships with the children. The adult-child ratio and the total number of children would be appropriate to the children's ages and needs, allowing for substantial interaction in an atmosphere that would be active and stimulating, but not chaotic. Children would have a wide range of opportunities to learn through structured activities, play and exploration. The

¹⁷David Hamburg in Carol Copple, Quality Matters: Improving the Professional Development of the Early Childhood Workforce (New York: Carnegie Corporation, 1991), p. i.

physical facility would be safe, child-friendly, and organized so that toys and other materials appeal to children and are suited to their developmental stage.

The system would be family-centered and responsive to parents' needs. The National Association of State Boards of Education Task Force on School Readiness underscores the importance early childhood specialists place on close links between home and program.¹⁸ "The best early childhood programs work with and through parents. Rather than erode or conflict with parental responsibility, they empower and affirm families."¹⁹ In a system that truly works for children and families, programs would involve parents in activities and would reinforce parents' primacy in making decisions about their children; the system as a whole, if not the programs themselves, would offer parents education and support in carrying out their responsibilities.

Another important aspect of family-centeredness would be respect for a child's cultural and linguistic heritage. Fillmore and Britsch observe that "children bring to school different linguistic and social orientations and abilities, each appropriate to the cultural and sociolinguistic backgrounds from which the children come."²⁰ These differences would be recognized and treated positively as children are helped to adapt to a new environment. Moreover, the first-language skills of language-minority children would be reinforced, so as not to disrupt a vital connection to the family.

Finally, the ideal system would include quality care available every day, year-round, at all hours and in locations that are convenient for parents and do not place undue stress on families trying to balance the demands of work with the needs of their children.

The system would respond comprehensively to families' and children's needs. Whether provided directly by the early care and education system itself or created through linkages with other programs in the community, the system would assure that the full range of children's needs -- including health care and good nutrition -- is addressed. The system would also include the capacity to assess broader family needs

¹⁸For the purposes of this section, the word "program" is used to denote any setting in which a child receives care and education. Thus, family day care homes, centers, or preschool classes would all be considered "programs."

¹⁹National Task Force on School Readiness, Caring Communities: Supporting Young Children and Families (Alexandria, VA: National Association of State Boards of Education, December 1991), p. 13.

²⁰Lily Wong Fillmore and Susan Britsch, "Early Education for Children from Linguistic and Cultural Minority Families," unpublished paper prepared for the Early Education Task Force of the National Association of State Boards of Education (June 1988).

and concerns, make appropriate referrals for additional services, and ensure that effective connections are made to those services.

The system would assure stability, consistency, and continuity in children's care and education. To develop the social competence and personal security that are considered part of readiness, young children need stability and consistency in their environments and in relationships, including those with caregivers. In the ideal, adequate compensation would reduce turnover and assure that caregivers do not leave the field. With respect to the children themselves, the system would assure that they do not have to move from place to place during a day, for example, to attend a half-day preschool program at one site and then to be cared for at another site for the balance of the day. Further, changes in a family's financial circumstances -- if, for instance, a parent successfully finds employment with Family Support Act assistance -- would not necessitate a change in caregivers.

Finally, continuity would be assured as a child begins his or her formal schooling. As a National Policy Forum convened by the federal government recently observed, ". . . children often experience an unnecessary and upsetting disconnectedness in their lives as they move from preschool to school settings. Developmental approaches that are the center of quality preschool programs are not necessarily continued in kindergarten and the primary grades. Parents experience as an abrupt change . . . as do the children."²¹ The new system would ease the transition for both child and parent, offering a classroom experience in the early grades that has many similarities to quality early care and education settings, actively working to assure that parents continue to be engaged in their child's learning, and assuring that comprehensive services continue to be available.²²

IV. New Building Blocks

An ideal system such as that described above will be a costly enterprise, one that is likely to demand significantly increased public and private sector support. But before such support can be secured, two steps must occur. First, the nation must begin to

²¹"Sticking Together: Strengthening Linkages and the Transition Between Early Childhood Education and Early Elementary School," Proceedings of a National Policy Forum sponsored by the U.S. Department of Health and Human Services and the U.S. Department of Education, September 1991.

²²For additional information about transition, see: B. Caldwell, "Continuity in the Early Years: Transitions Between Grades and Systems," in S. L. Kagan (ed.), The Care and Education of America's Young Children: Obstacles and Opportunities (Chicago: National Society for the Study of Education, 1991); S.L. Kagan, "Moving From Here to There: Rethinking Continuity and Transitions in Early Care and Education," in B. Spodek and D. Saracho (eds.), Issues in Early Childhood Curriculum (New York: Teachers College Press, 1991); and J. Love, M. Logue, J. Trudeau, and K. Thayer, Transitions to Kindergarten in American Schools (Hampton, NH: RMC Research Corporation, 1991).

recognize early care and education expenditures as a worthy and cost-effective investment, with durable payoffs to society at large. Second, the substantial resources that already are being spent on young children must be used more effectively to move us closer to the envisioned system.

The present landscape of funding for services to young children and their families is incredibly varied and complex. For example, the National Academy of Sciences cites a U.S. Department of Labor report identifying thirty-one programs in eleven federal agencies that provide funds for child care or related services.² Tax credits enhance families' ability to purchase care directly and, in many states, the Social Services Block Grant (Title XX of the Social Security Act) subsidizes care. Medicaid, especially through the Early and Periodic Screening, Diagnosis and Treatment Program, and the Maternal and Child Health Program finance health care services. Nutritional needs are addressed through the Women's, Infants' and Children's (WIC) Feeding Program and the Child Care Food Program authorized under the National School Lunch and Child Nutrition Act.

Adding to this picture, as we noted above, are several sources of new money. How that new money is used -- and perhaps more important, how those resources are woven together with the dollars already on the table to make a coherent whole -- may well determine whether the nation meets the challenge before it, turning today's opportunity into brighter futures for children now at risk.

Among the major sources of new or expanded support for young children and their families are the following:

A. *Family Support Act of 1988*

The Family Support Act (FSA) of 1988 marked an important step toward reform of the welfare system. FSA shifts the emphasis of Aid to Families with Dependent Children (AFDC), the nation's primary welfare program, from simply providing income support to building strong families and helping them to become self-sufficient.

The Act recognizes that support services are a fundamental element in allowing parents to get and keep a job. Key among such services is child care, especially given FSA's mandate that parents with children as young as age three, and at state option as

²U.S. Department of Labor, Child Care: A Workforce Issue: Report of the Secretary's Task Force (Washington, D.C.: U.S. Department of Labor, 1988), cited in C. Hayes, J. Palmer, and M. Zaslow, Who Cares for America's Children: Child Care Policy for the 1990's (Washington, D.C.: National Academy Press, 1990).

young as age one", will be expected to seek work or participate in a program designed to prepare them for work.

The law requires that states guarantee care for the children under age thirteen of every AFDC parent who is satisfactorily participating in an approved education, training, or employment activity, even if the activity is not funded through the Family Support Act's Job Opportunities and Basic Skills (JOBS) program.² Further, FSA provides that families leaving the assistance rolls because of increased earnings, whether or not they have participated in JOBS, will be eligible for a "transitional child care" subsidy for a year after they become ineligible for AFDC.

Federal funding for FSA-related child care is provided on an "open-ended entitlement" basis with a required state contribution -- that is, the federal government will fund between fifty and eighty percent³ of all expenditures by a state for this purpose. The General Accounting Office estimates that FY 1991 JOBS-related child care expenditures totaled \$356 million, \$200 million of which were federal funds.⁴

States are free to determine which payment options or methods of providing care they wish to use. They may, for example, provide child care directly, contract with providers, or provide cash or vouchers to parents to allow them to purchase care. If more than one type of care is offered, parents must be given a choice as to which they prefer. Payment rates must be at least the lesser of the actual cost of care or \$175 per month for a child over age two or \$200 for a child under two. States are permitted to pay a higher rate if that is justified by a local market rate survey, although the federal government will match payments only up to the seventy-fifth percentile of the local market rate. A sliding fee scale must be established for transitional child care.

²Eight states at present have extended the mandate to cover parents whose youngest child is age one or older. In addition, under the Family Support Act, adolescent parents may be required to participate in an educational activity if they have not finished high school, regardless of the age of their child.

³The extent to which child care is guaranteed for a parent who is in a non-JOBS activity is presently the subject of debate. HHS regulations implementing the JOBS program limited the guaranteed child care obligation to families in an approved education and training activity under JOBS. However, a federal district court judge in late December, 1991 ruled such a limitation invalid. The California Department of Social Services, which was the defendant in the lawsuit, expects to appeal.

⁴The FSA child care matching rate for a particular state is its Medicaid matching rate. Rates vary between approximately 50 and 80 percent, depending on the wealth of the state.

⁵United States General Accounting Office, Welfare to Work: States Begin JOBS, But Fiscal and Other Problems May Impede Their Progress (Washington, D.C.: United States General Accounting Office, 1991).

FSA places primary administrative responsibility for both the JOBS program and FSA-related child care with the state agency responsible for managing AFDC, which in turn is permitted to contract out for services. The administering agency is required to coordinate with existing early care and education programs, including Head Start and Chapter I.

B. Title IV-A (of the Social Security Act) At-Risk Child Care Program

This new program was created to serve low-income families who need child care in order to work and who, without subsidized care, would be at risk of becoming dependent on AFDC. A total of \$300 million per year will be available through 1995. Funds will be allocated based on the proportion of all children under age thirteen residing in each state. Up to the amount of the state allocation, the federal government again will cover between fifty and eighty percent of all expenditures, with the state required to provide the rest.

Like FSA, the IV-A At-Risk program requires that parents be given a choice about provider or payment option, if multiple forms are offered as part of the overall program. States may fund providers through grants or contracts, provide parents with vouchers to pay providers, or use a combination of approaches. Provisions regarding payment rates are the same as those for FSA child care. A sliding fee scale is to be established for IV-A At-Risk subsidies. All providers receiving funds must be licensed, regulated, or registered by the state unless the provider is a family member caring only for members of his or her family.

The state agency responsible for the AFDC program and FSA is the designated administering agency, but it is permitted to contract out these responsibilities. Child care under the IV-A At-Risk program is to be coordinated with existing early care and education programs in the state, including Head Start and Chapter I. States are required to submit annual reports to the U.S. Department of Health and Human Services on the amount and kind of care provided under this program and, beginning in FY 1993, on licensing and registration requirements and enforcement.

C. Child Care Improvement Grants

The legislation enacting the IV-A At Risk program also increased an existing discretionary grant program to states to improve licensing and registration processes and to monitor child care provided to AFDC recipients. The agency responsible for managing AFDC is responsible for administering this grant money, but improvement efforts are to be coordinated with other early care and education programs in the state. No appropriation was made for FY 1992, but \$50 million per year has been authorized for FY 1993 and FY 1994; states must provide a ten percent match. At least half these funds must be used for provider training.

D. Child Care and Development Block Grant (CCDBG)

The Child Care and Development Block Grant, enacted as part of the Act for Better Child Care (ABC) bill, provides federal funds to improve the affordability, accessibility, and quality of child care. \$732 million was appropriated for FY 1991 and \$825 million for FY 1992; authorizations are \$925 million for FY 1993 and for FY 1994 and 1995 "such sums as may be necessary." These funds will be allocated to states on a formula basis, considering the number of children in the state under age five, the number of children receiving free and reduced price lunch, and the state's per capita income. No state match is required, and funds may be carried over from one year to the next.

The majority of CCDBG funds are to be spent for direct services, primarily to make child care more affordable or more widely available. In the law, specific mention is made of before and after-school care and early childhood development services. At least five percent of the total CCDBG funding received by a state must be spent on quality improvements, which may include expenditures for: training and technical assistance, resource and referral activities, improved compensation for child care staff, loans and grants to help facilities meet state and local standards, and monitoring and enforcement of state standards and licensing requirements.

Families are eligible for CCDBG child care assistance if their children are younger than age thirteen, the parents are working or attending a job training or educational program, and their family income is below seventy-five percent of the median state family income. Children in very low-income families and children with special needs are to receive priority. A sliding fee scale for services is required, but services can be given at no cost to families whose income is at or below the poverty level.

CCDBG requires that parents be able to choose any licensed, regulated or registered provider of care. If they choose not to use a provider who has a grant or contract to provide care, they must be offered a voucher they can use to pay a provider of their choice, so long as that provider meets minimum requirements. Under the law, payment rates must be at a level that assures eligible children will have equal access to services that are comparable to services received by children who are not eligible. States must set health and safety requirements for all providers receiving CCDBG funds and must establish a consumer education program that provides information on licensing and regulatory requirements.

The law requires that the Governor submit a state plan to qualify for funds and designate a lead agency for administration of the Block Grant. In all but a handful of states, that responsibility has been given to the state human service agency. The lead agency is permitted to delegate responsibility for early care and education and after-school services to another agency. It is expected to coordinate CCDBG services with other early care and education programs in the state.

The law also requires that: states review all licensing and regulatory requirements, if such a review has not been done in the past three years; in 1992 begin collecting data on child care salaries and benefits; and report annually to the U.S. Department of Health and Human Services on their progress in improving the quality of care and on the extent to which child care needs are being met.

E. Head Start and Related Programs

Head Start, a twenty-five year old program widely regarded as a success and a model by policymakers all along the political spectrum, combines developmental educational programming with nutrition, health care, and social services for low-income youngsters between age three and compulsory school age. This comprehensive effort also places strong emphasis on community and parent participation and uses a multi-cultural approach that meets the needs of a wide variety of families.

Out of concern that many children in low-income families or otherwise at risk are not benefiting from Head Start, the Human Services Reauthorization (Augustus F. Hawkins) Act of 1990 included a major expansion of program funding. Appropriations for FY 1991 and 1992 were \$1.95 billion and \$2.2 billion respectively; \$5.92 billion has been authorized for FY 1993 and \$7.66 billion for FY 1994. Head Start funds are allocated by state on the basis of a multi-factor formula that heavily emphasizes the number of children in poverty. In contrast to all other federal funding for early childhood programs, however, Head Start funds are distributed directly to local agencies rather than to a state agency. Local grantees are expected to provide twenty percent of program costs in cash or in kind.

Although historically Head Start has been primarily a part-day, center-based program, provisions in the Reauthorization allow variations, including the option to provide year-round, full-day services and to serve children for more than one year.* Further, it increases funds for Parent and Child Centers, which provide prenatal and postnatal services to Head Start-eligible parents and children up to age three. Also funded is a Head Start Transition Project, with demonstration grants awarded to Head Start agencies that have formed consortia with local education agencies to assist children as they make the transition to school.

In addition, the Reauthorization Act responded to concerns about the increasing difficulty of maintaining the quality of Head Start programs, especially in light of rapid expansion. Ten percent of Head Start's \$1.95 billion 1991 budget and twenty-five percent of the increase in appropriated funds in subsequent years is to be set aside for quality improvement -- with particular emphasis on improving staff compensation -- and an additional two percent for training.

The Reauthorization Act also contained a special grant program designed to foster greater collaboration among Head Start, state organizations, and other early care

*Though permissible, full-day, year-round services are not yet prevalent in Head Start.

and education programs.² These grants further serve to strengthen Head Start's visibility at the state level, which to date has tended to be relatively weak because of the federal-to-local funding structure. In addition to these grants, the U.S. Department of Health and Human Services, which administers Head Start, is providing policy guidance and technical assistance to local Head Start programs to encourage the formation of linkages with Family Support Act/JOBS programs.

F. *Even Start*

Even Start is a federal "family literacy program," combining early childhood education for children between the ages of one and seven with adult education for parents whose literacy level is low. Specifically targeted for Even Start programming are communities in which there is a concentration of low-income families.

FY 1991 appropriations for Even Start totaled \$49.7 million, which was distributed directly to local education agencies. Beginning in 1992, Even Start has become a formula grant program, with funds going to the state department of education, which in turn determines how funds are to be redistributed to local programs. Appropriations are \$70 million for FY 1992; the authorization for FY 1993 and 1994 are "such sums as may be necessary."

G. *Chapter 1 (Elementary and Secondary Education Act, as amended by P.L. 100-297)*

Chapter 1, the largest federal program supporting elementary and secondary education, provides funds to local education agencies to help them meet the needs of low-achieving children in high-poverty communities. In addition, a small portion of Chapter 1 funds are provided to state education agencies to operate programs for children of migrant workers and fishermen and for children in institutions for the handicapped, neglected and delinquent. Total appropriations for Chapter 1 were \$6.2 billion in FY 1991 and \$6.8 billion in FY 1992. Funds are allocated according to a formula based on statewide average per pupil expenditures, the number of children receiving Aid to Families with Dependent Children (AFDC) and the number of children in families with incomes below the poverty line.

The law authorizing Chapter 1 explicitly permits funds to be used for preschool programs, among other uses, but local education agencies determine the actual target age groups and types of services to be offered. Currently, about eight percent of the five million children being served with Chapter 1 funds are in pre-kindergarten or kindergarten programs. The federal government has expressed interest in encouraging greater focus of Chapter 1 services on young children and their families and in permitting Chapter 1 funds to be used to help coordinate and improve a wide range of supports for youngsters in the early years.

²The twelve states receiving collaboration grants are: Maine, New Jersey, New York, Pennsylvania, Virginia, Kentucky, South Carolina, Ohio, Texas, Nebraska, South Dakota, and Oregon.

H. *Individuals with Disabilities Education Act (IDEA)*

This federal program has two parts relevant to young children -- preschool grants and an early intervention program for infants and toddlers.

Federal law requires a "free, appropriate public education in the least restrictive environment" for children age three through five who have a physical, emotional, or mental handicap. Preschool grants support special education and related services for these children. Child assessment, parent involvement and parent education also are allowable service activities. There are no income criteria for eligibility. Children are eligible if they experience developmental delay or are diagnosed with conditions likely to cause delay. States also may extend services to children who, if services are not provided, are at risk of substantial delay.

Appropriations for the IDEA preschool program were \$292.7 million for FY 1991 and \$320 million for FY 1992; authorizations for FY 1993 and 1994 are "such sums as may be necessary," with a cap of \$1,500 per child served. Each state receives an allotment of appropriated funds based on the number of children being served. Although the state must meet certain requirements to qualify for funds, no state financial match is explicitly required. However, because the federal law creates an "entitlement" (guarantee that any child who is eligible must be served) which cannot be met fully with federal dollars alone, state and local expenditures are in effect mandated and are sizeable.

Federal preschool program funds go to state education agencies, which must pass the majority through to local education agencies; agencies may contract with public or private providers for delivery of services. The law encourages the administering agencies to coordinate with other entities to create a comprehensive service delivery system and permits up to twenty percent of the available funds to be used for planning and developing such a system.

The second IDEA component for young children, known commonly as Part H of P.L. 99-457, provides grants to states to plan a statewide, coordinated, comprehensive early intervention program for all children from birth through two who are experiencing a developmental delay or are diagnosed with conditions likely to cause delay and for their families.

Part H was enacted as a five-year grant program, ending in September 1992. Resources under this program support planning and infrastructure development; states are expected to identify the resources for actual service delivery. Appropriations were \$117 million for FY 1991 and \$175 million for FY 1992. Distribution of funds is by formula, based on the number of infants and toddlers in the state. As with the preschool grant program, no state match is required explicitly, but the state must meet certain requirements to qualify for funds and must provide the dollars necessary to fulfill the entitlement for services which is created.

A single agency designated by the governor is charged with administration of Part H, but services themselves are delivered by a wide variety of agencies. A human service agency has the lead in eleven states, education in eighteen states, and another entity in twenty-one states. All states also are required to have an interagency coordinating council. In many instances, these councils and the substantial interagency work they have undertaken on behalf of developmentally disabled children have served to advance cross-sector interest and action directed to other groups of children as well.

I. *Comprehensive Child Development Program*

The Comprehensive Child Development Program is a federal demonstration program. Its purposes are to "(1) provide intensive, comprehensive, integrated, and continuous support services to children from low-income families from birth to entrance into elementary school and (2) provide needed support services to parents and other household family members to enhance their economic and social self-sufficiency."³⁰ Appropriations of \$45 million a year through FY 1993 support grants to twenty-four

community sites which are projected to serve more than 2,500 families annually. A formal evaluation of the initiative will be conducted.

Among the services which grantees must provide directly or by coordination with other community services are: prenatal care, health care, child care, early childhood education that is developmentally appropriate, early intervention services for children at risk of developmental delay, nutrition services, parenting education, mental health care, vocational training and adult education, substance abuse education and treatment, and assistance in obtaining necessary income support and housing.

J. *State-Funded Programs for Young Children*

All states commit state general revenues to at least some programs intended to serve or indirectly benefit young children. There is tremendous variation in the size, scope, and nature of these efforts, which include dependent care tax credits, child care, preschool education, expansion or enhancement of Head Start, and parent education.

A 1989-90 survey by the National Governors' Association found that 44 states were spending over \$1 billion annually in state general revenues on child care. With full implementation of the various measures described above, which occurred subsequent to the survey, all states are now providing some funding for child care and the total expenditures are substantially higher. In Texas, for example, 1989 expenditures to serve 16,611 children daily totaled \$37 million, \$2.75 million of which was state funds; estimates by the Texas Department of Human Services for 1992 are that 60,000 children

³⁰Ruth Hubbell, et. al., Comprehensive Child Development Program: A National Family Support Demonstration (Washington, D.C.: U.S. Department of Health and Human Services, 1991).

will be served at a cost of \$178.5 million, \$29 million of which are state funds.³¹ With very few exceptions, state funding for subsidized child care is administered by a human service agency.

Over thirty states also provide funding for preschool initiatives and/or additions to Head Start. State expenditures in this arena have been estimated at over \$200 million annually and, even in an era of fiscal crisis, increases are being considered. For example, the proposed FY 1993 budget for the state of California includes both preschool and Head Start expansion. The majority of state early childhood education programs are targeted to children at-risk. Most operate on a half-day basis; about a quarter of the state programs permit either a half-day or a full school day. Only five states permit early childhood education funds to be used for a full working day, and few full working day programs have been funded. About half the states' early childhood efforts mandate comprehensive programs similar to the Head Start model.

Responsibility for administration of state-supported early childhood education programs often lies with the state education agency. About half the states funding early childhood programs permit only school districts to receive funding; the others either contract directly with private agencies or permit school districts to subcontract with private agencies. In a handful of states, legislation requires coordination with Head Start in the implementation of state-funded preschool programs, either at the state or local level. For instance, in some states interagency councils at the state and local level must include a Head Start representative.

V. Putting the Pieces Together

"There is no more essential or more sensitive challenge before us than to create new partnerships and shared responsibility for the development of young children."³²

At this critical juncture, when dramatic guarantees are being made that all children will succeed, the stakes have been raised considerably for decisionmakers who must choose how to spend the expanded resources for child care and early childhood education. As we have discussed, the nation's present array of programs and services for young children is still far from a system that can effectively nurture the healthy development of all, preparing them for success in school and laying the foundation for eventual success as adults in the marketplace. Correcting this in part means improving quality and increasing availability of the individual components in a landscape that is desirably diverse. But it also means linking these various programs to form a coherent

³¹Claudia Langguth, "Providing Child Care for 60,000 Kids," Public Welfare, Fall 1991.

³²Council of Chief State School Officers, "Early Childhood and Family Education: Foundations for Success," Policy Statement adopted November, 1988.

whole and to assure that all families have the knowledge and wherewithal to obtain the support and assistance their children need.

We believe that spending the new resources wisely to respond to these imperatives will entail actions that look both to the future and to the present. With an eye to the long-term, policymakers in the various sectors together need to:

- Create a shared vision for young children and their families; and
- Establish a sustainable cross-sector mechanism to carry out long-term planning and implementation to bring the vision to reality.

At the same time, it is important to assure that current decisions and actions both improve supports for children and families and contribute to the evolution of a more effective system overall. To do this, policymakers need to:

- Lay the foundation for a coherent early childhood system by building linkages among the components and developing joint or coordinated responses to problems in the current set of programs and services; and
- Strengthen the overall capacity to connect disadvantaged families to high quality developmental services and to enhance families' capability to act on their own behalf to locate and choose among such resources.

Create a shared vision for young children and their families

Perhaps the single most important step that can be taken is agreement on a system-spanning vision of what a state wants for its young children and of the supports the state will strive to provide families and children to reach that vision. In an earlier section of this paper -- "What to Shoot For: Characteristics of an Early Care and Education System That Works for Children and Families" -- we describe some of the major elements that might be included. Within the vision, the fundamental goals for young children from disadvantaged homes should be no different than those for all children, although the former group may receive priority or special emphasis as strategies to reach the goals are developed.

Such a vision would serve several important purposes: 1) it would provide a framework for transcending the philosophical differences and separate traditions of the various fields which serve young children and for accomodating goals that now sometimes are perceived to be in conflict, such as getting parents employed and providing high quality services for their children; 2) it would focus the various agencies, with their separate missions, responsibilities, and resources, on a common objective; and 3) it would put children, not any particular program, front and center as the starting point for planning. In this context, the various funding streams would no longer drive the system, but rather would be regarded as tools to be used in whatever manner is most suited to the objective.

The vision would also serve to build a strong constituency in favor of more effective supports for children and families, if the process by which it is developed is broadly inclusive. The various professional and provider communities, affected state and local agencies, parents, representatives of the business community, and interested members of the general public all should have a chance for genuine participation in the development process.

Establish a sustainable cross-sector mechanism to carry out long-term planning and implementation to bring the vision to reality

Once a vision is developed, the extended process of implementation will begin. Changing the present "non-system" into a comprehensive, well-integrated set of supports for young children and their families will not be an overnight task. Dollars must be found to upgrade and expand services, turf battles and misunderstanding across sectors must be overcome, and an infrastructure of quality facilities, appropriately trained and compensated personnel and effective mechanisms for connecting families and resources must be developed. Because these tasks will take hard work and commitment over a sustained period of time, it makes sense up front to assign the task to a group that can be expected to have long-term staying power.

If a cross-sector group was used to develop the vision, some may consider charging this group with the task of implementation, as well. But because the responsibilities at this stage will be much more detailed and administrative in nature, it is quite likely that a different kind of team will be needed. There may already be an interagency entity with a related mission and sufficient vitality to take on an expanded role, or it may be necessary to form an entirely new group dedicated to this purpose. In any case, the composition and placement of the group within state government should balance the need for members senior enough to influence policy with the probable need to span the terms of several different governors.

A number of states have already moved to create high-level, agency-spanning entities to promote integrated planning and activity. Minnesota, for example, has established a Children's Cabinet of key state agency commissioners. The Cabinet is developing a "children's budget," has agreed on milestones to measure progress toward the readiness goal, and is designing a statewide information system that will bring together data from a number of state agencies. Similar purposes are addressed by the state of Washington's Family Policy Council, composed of the commissioners of six state agencies and staff from the Governor's Office, which provides guidance to the various agencies on the development of family-centered service delivery systems.

Other states have created entities whose membership goes beyond the public agencies serving young children. State commissioners serve only in an ex officio capacity on Virginia's Council on Child Day Care and Early Childhood Programs, whose members include providers, parents, businessmen, and representatives of local social service departments, school systems and Head Start programs. The Council was established in 1989 to (1) provide an integrated, multi-agency approach for the delivery of quality child day care and early childhood development services; and (2) plan,

coordinate, and evaluate all child day care and early childhood development programs. Unlike most groups which have non-agency membership, the Virginia Council has administrative as well as advisory functions; for example, it has been designated as the lead agency for the Child Care and Development Block Grant.

Although, as the National Governors' Association observes,³ the states are the "system builders," cross-sector commitment and action will be crucial in local communities as well, where in fact most of the operational decisions are actually made. In 1988, Iowa enacted legislation that addressed this intergovernmental perspective. A state-level Child Development Coordinating Council, with representatives of the Departments of Education, Human Services, Human Rights, and Public Health, Area Education Agencies, higher education institutions and Head Start parents, was created to promote the provision of child development services to at-risk three- and four-year-old children. Its work is intended to support and be informed by the work of Local Early Childhood Education Committees, which are encouraged to assess the quality and availability of local programming for young children and to plan for needed expansion and improvement.

A common aspect of all these approaches is that they bring together multiple agencies, sectors, or constituencies. Many might ask if it would not be easier simply to consolidate responsibility in a single agency. It might appear that the process of bringing coherence would indeed be simpler if fiscal, administrative and programmatic authority were centralized rather than dispersed, but practically speaking, at present such consolidation seems unlikely. Perhaps eventually the concept of "young children's programming" will be sufficiently integrated to permit a simplified administrative approach, but for the time being the most realistic structure would seem to be one that accommodates diversity while fostering strong connections.

Lay the foundation for a coherent early childhood system by building linkages between separate components and developing joint or coordinated responses to problems in the current set of programs and services

Decisions that are being made now about the expenditure of new resources for early care and education programs can continue and even exacerbate the current problems, or can begin to move the system closer to one that is comprehensive and well-integrated. A good example of the latter is offered by states and communities that choose to make new service efforts joint undertakings. For instance, the Departments of Education and Human Services jointly administer New Jersey's GoodStarts and Urban Prekindergarten Pilot Programs, which expand services for urban three- and four-year-olds. In late 1991, the New York City Public Schools and the Human Resources Administration began construction of four early childhood centers they will operate together.

³National Governors' Association, Taking Care: State Developments in Child Care (Washington, D.C.: National Governors' Association, 1990).

Important changes are also possible with respect to existing services. Among the positive steps which realistically can be taken: coordinating funding to get the "biggest bang for the buck"; fostering administrative consistency; and encouraging collaboration between education, child care and other services to provide the kinds of programming children and families need.

Texas confronted the need to coordinate funding streams when new federal and state money meant expanding child care services by almost 400 percent in less than two years. Deciding to "radically change its management of child care resources,"⁴ the Department of Human Services, which was designated the lead agency for the CCDBG, created the Child Care Management System (CCMS). CCMS consolidates the administration of all subsidized child care, but at the same time has opened up the system to many more providers, including small ones, because of an automated system that greatly simplifies client referral, eligibility determination, billing and reporting. The automated system has also helped in the complex task of deciding when to apply various funding streams to pay for children's care; because of its success in this regard, according to Claudia Langguth of the Department of Human Services, "CCMS is truly seamless, allowing children to continue in care with the same provider if eligibility or funding changes."

Assuring that the situation for individual children is not disrupted is one crucial aspect of coordinating funding, but there can be systemic benefits as well. Blending funding streams -- within legal and auditable boundaries, of course -- can allow states to stretch the available dollars as far as possible, cover the widest range of needs, and help prevent the segregation of children on the basis of income. Flexible use of funding is also helping to create programs that meet both parental needs for full-day child care and children's developmental need for high quality programming. Through the combined efforts of the State Board of Education, Department of Public Aid, and Department of Children and Family Services in Illinois, for example, young children considered at risk are receiving extended-day care in enriched preschool programs.⁵ This sort of "wrap-around funding" to create a full-day program at a single site also is being explored increasingly in Head Start.

A potential roadblock to coordinating funding and other efforts to link different types of programs is variation in standards and regulations across those programs. Differences make it cumbersome if not impossible for agencies to draw on all available funding sources and reduce the flexibility to create the kinds of care and education options that families need. State efforts to unify standards across early childhood settings therefore represent significant milestones toward building a better system for young children and their families.

⁴Claudia Langguth, "Providing Child Care for 60,000 Kids," Public Welfare, Fall 1991, p. 24.

⁵See Smith, Blank and Collins.

Recognizing this, Washington State, for example, undertook a collaborative effort to revise regulations in order to achieve comparability among Head Start, special education, and child care standards and to create a common yardstick for what constitutes good services. The standards adopted are quite close to Head Start Performance Standards, emphasizing comprehensive responses to the full range of children's needs, including not only care and education, but also health and parent support.

Beyond these actions at the state level, many state policymakers are finding that the dual objectives of improved quality and greater coordination are well served by channeling their help through local entities established for these purposes. The Family Educational Network of Weld County (Colorado) is a good example. The Network administers Head Start, preschool programs, Family Support Act child care, and federally subsidized food services. The programs in the network, all of which meet Head Start performance standards, mix children whose care is subsidized by a variety of funding sources, and share facilities, equipment, transportation, and consultant services. Staff in all programs have access to training programs and are compensated equitably.³⁶

Similarly, the collaborative Farrell Area School District Early Intervention Program in Pennsylvania encompasses preschool services, Head Start, center-based and family day care, and a teen parent program. The School District provides referral and placement services to all parents in the community, including Department of Public Assistance clients. Among the other features of this well-integrated system are collaborative screening of youngsters, joint training and equitable compensation of staff, a common database listing all participants, common regulations and a common curriculum for all programs, joint planning, and cooperative purchase of supplies and materials.³⁷

Strengthen the overall capacity to connect disadvantaged families to high quality developmental services and to enhance families' capability to act on their own behalf to locate and choose among services

No matter how many high quality programs are created, assuring the well-being of young children will remain an elusive goal unless more effective means are developed through which those programs can reach the children who need them. That can be a daunting task, for those most in need often are the most isolated, whether by vast distances in rural areas or by crime and drugs which keep a family shut in its apartment in an urban housing project. Hospitals see children at birth and schools see them at about age five, but in between youngsters can be largely invisible to the systems of institutional supports that potentially can help nurture their healthy development.

³⁶Sharon L. Kagan, United We Stand: Collaboration for Child Care and Early Education Services (New York: Teachers College Press, 1991).

³⁷Ibid.

Remedying this situation will entail using every occasion for contact with a family as an opportunity to make important connections, as well as building new mechanisms for outreach and the provision of information. It also means an investment in parents -- giving them the knowledge and means to nurture healthy development and to make wise choices about those to whom they will entrust the care and education of their children. Assuring that parents are educated consumers is more important than ever, given the requirement attached to most federal funding that parents have the right to choose a provider.

Alachua County, Florida's Prekindergarten Early Intervention Council recognizes the centrality of families in assuring that children succeed. In addition to integrating a wide array of funding sources and connecting school-based programs, child care homes, and community agencies, the Council places a strong emphasis on providing parent information and support. Edward Zigler's Schools of the 21st Century also provide increased services to parents as well as children.³⁸

One of the best opportunities to reach disadvantaged families whose children are most at risk for school difficulties is through the welfare system, since even severely isolated families are likely to make contact with that system because of the need for financial assistance. Although care must be taken to assure that confidentiality and privacy rights are protected, the AFDC rolls potentially are a rich resource to identify children with a great need for health services, high-quality preschool programs, and other early intervention to prevent later problems.

Recognizing this opportunity, a number of states and localities are complementing the parental employment focus of their JOBS program with a specific emphasis on assessing the needs of children in the family and helping parents make good choices about the children's care. JOBS case managers in Kentucky, for example, have access to written and automated information about services like Head Start to help them counsel parents about options for their children.³⁹

In California, assistance for clients of the JOBS program, called GAIN, comes primarily through a network of resource and referral agencies (R & R's). These agencies, located throughout the state, counsel parents about child development, child care, and community services, and offer information about providers who fit a family's needs and preferences. The educational aspects of this service seem to be paying off. According to a new report by the Foundation for Child Development, "Staff at Bananas [an R & R agency in Oakland] believe that their strong focus on child care quality has

*For additional information on Schools of the 21st Century, see The School of the 21st Century, available from the Bush Center in Child Development and Social Policy, Yale University, 310 Prospect Street, New Haven, CT 06511.

³⁸Ibid.

encouraged a high proportion of parents enrolled in GAIN to choose regulated child care over informal arrangements."⁶⁰

VI. Conclusion

As this paper has discussed, two movements representing significant public commitments to meet the needs of children and families are rapidly gaining momentum: efforts to assure that parents have access to child care so that they can work, and efforts to assure that young children are ready to learn when they enter school. The first movement involves a multiplicity of programs and funding, most of which is administered by public and private human service agencies. The second movement primarily involves preschool, prekindergarten and early childhood education programs administered by state and local education systems.

Though each of these movements has value in its own right, there is a danger that, if they continue on parallel tracks, the destination for the nation may prove to be quite different from the one we want. Millions of young children could be left behind,

lacking the stimulation and support they needed in their early years and, as a consequence, facing an educational experience full of frustration and failure and a lifetime of dependency rather than productive citizenship. Only if we bring these movements together, into a coherent and integrated system that maximizes the use of federal, state and local resources and assures that youngsters receive the high quality care and education they need, will the future be more promising.

Collaboration across sectors in itself is not the answer to all of the inadequacies of a system that is seriously underfunded and beset with other problems. But it is a vital component, a way of assuring that present problems are not deepened and that the resources which are committed are used as well as possible. Now is the time for creative, collaborative leadership, speaking and acting in unison on behalf of our youngest citizens.

⁶⁰See Sheila Smith, Susan Blank, and Ray Collins, Pathways to Self-Sufficiency for Two Generations: Designing Welfare-to-Work Programs That Benefit Children and Strengthen Families (New York: Foundation for Child Development, 1992).

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